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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	PRD-50-NP
	First Named Inventor	Xiaoli Chen
	<i>COMPLETE IF KNOWN</i>	
	Application Number	
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TREATING SYNDROME X WITH SUBSTITUTED TETRALINS AND INDANES
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/419,927 60/495,758	10/21/2002 08/15/2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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Number Bar Code
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AND

☐ Practitioner(s) named below:
Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Evelyn D. Shen at telephone number (732) 524-6040.

Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

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Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Xiaoli

Family Name
or Surname Chen

Inventor's
Signature

Date

Residence: City Belle Mead

State NJ

Country USA

Citizenship USA

Mailing Address 115 Sleepy Hollow Lane

City Belle Mead

State NJ

ZIP 08502

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Keith T.

Family Name
or Surname Demarest

Inventor's
Signature

Date

Residence: City Flemington

State NJ

Country USA

Citizenship USA

Mailing Address 1 Newell Road

City Flemington

State NJ

ZIP 08822

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jung

Family Name
or Surname Lee

Inventor's
Signature

Date

10/9/03

Residence: City Ambler

State PA

Country USA

Citizenship USA

Mailing Address 1034 Ingram Court

City Ambler

State PA

ZIP 19002

Country USA

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Jay M.		Family Name or Surname Matthews	
Inventor's Signature <i>Jay M. Matthews</i>		Date 10-09-03	
Residence: City Lansdale	State PA	Country USA	Citizenship USA
Mailing Address 305 Walden Lane			
City Lansdale	State PA	ZIP 19446	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Philip		Family Name or Surname Rybczynski	
Inventor's Signature		Date	
Residence: City Branchburg	State NJ	Country USA	Citizenship USA
Mailing Address 29 Tuscarora Trail			
City Branchburg	State NJ	ZIP 08876	Country USA

Please type a plus sign (+) inside this box ☐

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		Examiner Name		
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TREATING SYNDROME X WITH SUBSTITUTED TETRALINS AND INDANES <i>(Title of the Invention)</i>				
the specification of which <input checked="" type="checkbox"/> is attached hereto OR <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/>				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Application Serial No.	Filing Date	Status
		Patented Patented Patented

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Xiaoli

Family Name
or Surname Chen

Inventor's
Signature

Xiaoli Chen

Date

10/9/03

Residence: City Belle Mead

State NJ

Country USA

Citizenship USA

Mailing Address 115 Sleepy Hollow Lane

City Belle Mead

State NJ

ZIP 08502

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Keith T.

Family Name
or Surname Demarest

Inventor's
Signature

Keith Demarest

Date

10/9/03

Residence: City Flemington

State NJ

Country USA

Citizenship USA

Mailing Address 1 Newell Road

City Flemington

State NJ

ZIP 08822

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jung

Family Name
or Surname Lee

Inventor's
Signature

Date

Residence: City Ambler

State PA

Country USA

Citizenship USA

Mailing Address 1034 Ingram Court

City Ambler

State PA

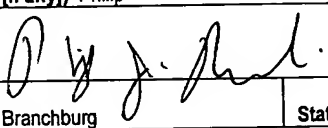
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Country USA

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Given Name (first and middle (if any)) Jay M.		Family Name or Surname Matthews	
Inventor's Signature		Date	
Residence: City Lansdale	State PA	Country USA	Citizenship USA
Mailing Address 305 Walden Lane			
City Lansdale	State PA	ZIP 19446	Country USA
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NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Philip		Family Name or Surname Rybczynski	
Inventor's Signature 		Date October 9, 2003	
Residence: City Branchburg	State NJ	Country USA	Citizenship USA
Mailing Address 29 Tuscarora Trail			
City Branchburg	State NJ	ZIP 08876	Country USA